

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned 3 JUL 10 AM 8: 56 submits for filing a certificate of Assumed Business Name. Please type or print legibly. SECRETARY OF STATE STATE OF IDAHO

FILED EFFECTIVE

Instructions are included on back of application.

2.	PONCE FARMS The true name(s) and <u>business</u> address(e business under the assumed business na		entity or individual(s) doing	_
	Name Complete Address			
	RAMON PONCE	2483 N 80	0 E, MONTEVIEW ID 83435	
	ELBA PONCE		00 E, MONTEVIEW ID 83435	- -
	The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 2483 N 800 E, MONTEVIEW ID 83435	on and Pub I	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080	-
5.	Name and address for this acknowledgme copy is (if other than # 4 above): 2483 N 800 E, MONTEVIEW ID 83435	ent	208 334-2301	
0:			Secretary of State use only	
•	ture: Kamon Source		*	
	ed Name: RAMON PONCE		· ·	
	city/Title: GENERAL PARTNER			
-	ture: Elba Ponce		IDAHO SECRETARY OF STATE 07/10/2013 05:0	10
	ed Name: ELBA PONCE		CK: 6323 CT: 158010 BH: 1381 1 e 25.00 = 25.00 ASSUM NAM	396
Capa	city/Title: GENERAL PARTNER		• # PROSE PRESE	-

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